Application or Docket Number

Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

FORM PTO-875

(Rev. 8/00)

CLAIMS AS FILED - PART I (Column 1) (Column 2)						SMALL ENTITY TYPE OR		OR	OTHER THAN SMALL ENTITY	
TOTAL CLAIMS			00		. 1	RATE	FEE	1	RATE	FEE
FOR			NUMBER FILED NUMB		BER EXTRA	BASIC FE	E 355.00	OR	BASIC FEE	710.00
TOTAL CHARGEABLE CLAIMS			20 minus 20= *			X\$ 9=		OR	X\$18=	3 to 2 to 2
INDEPENDENT CLAIMS			minus 3 = *			X40=		OR	X80=	
MULTIPLE DEPENDENT CLAIM PI			RESENT / D			+135=		OR	+270=	
* If the Prence in column 1 is less than zero, enter "0" in column 2					TOTAL		OR	TOTAL	710	
~	CLAIMS AS AMENDED - PART II					OTHER THAN SMALL ENTITY OR SMALL ENTITY				
e.		(Column 1)		(Column 2) HIGHEST	(Column 3)	SMALL		OR	SWALL	
AMENDMENT A	0	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 30	Minus	D	40	X\$ 9=		OR	X\$18=	18000
	Independent	NTATION OF M	Minus	PENDENT CLAIM	1=2	X40=		OR	X86=	17200
	FIRST PRESE	INTATION OF MI	JLIIPLE DEI	PENDENT CLAIV		+135=		OR	+270=	
			•			TOTAI ADDIT. FEE		OR	TOTAL	
(Column 1) (Column 2) (Column 3)							<u> </u>	או –	ADDIT. FEE	352
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	2	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		X40=		OR	X80=	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM					+135=		OR	+270=	
						TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)						ADDIT. FEE		.	ADDIT. FEE	
AMENDMENT C	•	CLAIMS REMAINING AFTER AMENDMENT	0	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	=	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***]=	X40=		OR	X80=	
H	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								070	
The entry in column 1 is less than the entry in column 2, write "0" in column 3.						+135=		OR	+270=	
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "3." **The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.										